


RECEIVED

SEND COMPLETED FORM TO: The appropriate State or Regional Office.	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM Hazardous Waste Program MO Dept. of Natural Resources		
1. Reason for Submittal MARK ALL BOX(ES) THAT APPLY	Reason for Submittal: <input type="checkbox"/> To provide initial Notification (first time submitting site identification information / to obtain an EPA ID Number for this location). <input type="checkbox"/> To provide subsequent Notification (to update site identification information for this location). <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application. <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #) <input checked="" type="checkbox"/> As a component of Hazardous Waste Report (IF marked, see sub-bullet below) <input checked="" type="checkbox"/> Site was a TSD facility and/or generator of > 1,000 kg of hazardous waste, > 1kg of acute hazardous waste, or > 100 kg of acute hazardous waste spill cleanup in <u>one or more months</u> of the report year (or state Equivalent LQG regulations)		
2. Site EPA ID Number	EPA ID Number: MOD007152903		
3. SiteName	Site Name: Northrop Grumman Guidance and Electronics Company, Inc.		
4. Site Location Information	Street Address: 4811 West Kearney Street City, Town or Village: Springfield County: GREENE State: MO Country: United States Zip Code: 65803		
5. Site Land Type	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
6. NAIC Code(s) for the Site (at least 5-digit codes)	A. 562910 B. C. D.		
7. Site Mailing Address	Street or P.O. Box: PO Box 1693 Mail Stop 1401 City, Town or Village: Baltimore State: MD Country: UNITED STATES Zip Code: 21203		
8. Site Contact Person	First Name: Adam MI: E Last Name: Saylor Title: Sr. Environmental Engineer Street or P.O. Box: PO Box 1693 Mail Stop 1401 City, Town or Village: Baltimore State: MD Country: UNITED STATES Zip Code: 21203 Email: adam.saylor@ngc.com Phone Number: 4109937080 Extension: Fax: 4109811946		
9. Legal Owner and Operator of the Site	Name of Site's Legal Owner: Northrop Grumman Guidance and Electronics Company, Inc. Date Became Owner: 04/02/2001 Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other Street or P.O. Box: 1840 Century Park East City, Town or Village: Los Angeles Phone: State: CA Country: UNITED STATES Zip Code: 90067 Name of Site's Operator: Northrop Grumman Guidance and Electronics Company, Inc. Date Became Operator: 04/02/2001 Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		



RCRA INFO data entered
 by SA TRIG
 on 23 JUL 2010
NOV 10 2010

10. Type of Regulated Waste Activity (at your site)Mark "Yes" or "No" for all current activities (as of the date submitting the form); complete any additional boxes as instructed.**A. Hazardous Waste Activities; Complete all parts 1-7.****Y ☒ N ☐ 1. Generator of Hazardous Waste**

If "Yes", choose only one of the following - a, b or c.

- ☒ a. LQG: Generates, in any calendar month, 1,000 kg/mo (2,200 lbs./mo.) or more of hazardous waste; OR Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs./mo.) of acute hazardous waste; OR Generates, in any calendar month OR accumulates at any time, more than 100 kg/mo (220 lbs./mo.) of acute hazardous spill cleanup material.

- ☐ b. SQG: 100 to 1000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste.

- ☐ c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste.

If "Yes" above, indicate other generator activities.

- Y ☐ N ☒ d. Short-term Generator (generate from a short-term or one-time event and not from on-going processes). If "Yes", provide an explanation in the Comments section.

- Y ☐ N ☒ e. United States Importer of Hazardous Waste

- Y ☐ N ☒ f. Mixed Waste (hazardous and radioactive) Generator

Y ☐ N ☒ 2. Transporter of Hazardous Waste
If "Yes", mark all that apply.

- ☐ a. Transporter
☐ b. Transfer Facility (at your site)

Y ☐ N ☒ 3. Treater, Storer or Disposer of Hazardous Waste Note: A hazardous waste permit is required for these activities.**Y ☐ N ☒ 4. Recycler of Hazardous Waste****Y ☐ N ☒ 5. Exempt Boiler and/or Industrial Furnace**
If "Yes", mark all that apply.

- ☐ a. Small Quantity On-Site Burner Exemption
☐ b. Smelting, Melting, and Refining Furnace Exemption

Y ☐ N ☒ 6. Underground Injection Control**Y ☐ N ☒ 7. Receives Hazardous Waste from Off-site.****B. Universal Waste Activities; Complete all parts 1-2.****Y ☐ N ☒ 1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes", mark all that apply.**

- a. Batteries ☐
b. Pesticides ☐
c. Mercury containing equipment ☐
d. Lamps ☐
e. Other (specify) ☐
f. Other (specify) ☐
g. Other (specify) ☐

Y ☐ N ☒ 2. Destination Facility for Universal Waste
Note: A hazardous waste permit may be required for this activity.**C. Used Oil Activities; Complete all parts 1-4.****Y ☐ N ☒ 1. Used Oil Transporter**
If "Yes", mark all that apply.

- ☐ a. Transporter
☐ b. Transfer Facility (at your site)

Y ☐ N ☒ 2. Used Oil Processor and/or Re-refiner
If "Yes", mark all that apply.

- ☐ a. Processor
☐ b. Re-refiner

Y ☐ N ☒ 3. Off-Specification Used Oil Burner**Y ☐ N ☒ 4. Used Oil Fuel Marketer**
If "Yes", mark all that apply.

- ☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

D. Eligible Academic Entities with Laboratories - Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K

* You must check with your State to determine if you are eligible to manage laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K

- ☐ 1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories
See the Item-by-Item instructions for definitions of types of eligible academic entities. Mark all that apply:

- ☐ a. College or University
- ☐ b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university
- ☐ c. Non-profit institute that is owned by or has a formal written affiliation agreement with a college or university

- ☐ 2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories

11. Description of Hazardous Wastes

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

F002	F003	F005				

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.

12. Notification of Hazardous Secondary Material (HSM) Activity

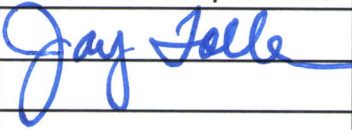
Y ☐ N ☒ Are you notifying under 40 CFR 260.42 that you will begin managing, are managing or will stop managing hazardous secondary material under 40 CFR 261.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25)?

If "yes", your must fill out the Addendum to the Site Identification Form: Notification for Managing Hazardous Secondary Material.

13. Comments

Hazardous waste activities that occurred during this reporting period were the result of remediation operations at the site. The large quantity generator status indicated on this form is based on the episodic generation of the remediation waste.

14. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11).

Signature of owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	Jay Tolle, Manager, Environmental Programs and Remediation	02/04/2010

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME:

Northrop Grumman Guidance and Electronics
Company, Inc.

EPA ID NO: MOD007152903

U.S. ENVIRONMENTAL
PROTECTION AGENCY

2009 Hazardous Waste Report

WASTE GENERATION
AND MANAGEMENTGM
FORM

Sec. 1	A. Waste Description Toxic Solids From Remediation Soil Borings Containing Trace Solvents			
B. EPA Hazardous Waste Code(s) F002		C. State Hazardous Waste Code(s)		
D. Source Code G44 Management Method Code for Source Code G25		E. Form Code W301	F. Quantity Generated in 2009 7.000000 UOM 2 Density 1.20 <input type="checkbox"/> lbs/gal <input checked="" type="checkbox"/> sg	G. Waste Minimization Code X

Sec. 2	Was any of this waste managed on-site? <input type="checkbox"/> Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> No (SKIP TO SEC. 3)			
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2		
On-site Management Method Code		Quantity treated, disposed or recycled on-site in 2009		On-site Management Method Code
				Quantity treated, disposed or recycled on-site in 2009

Sec. 3	A. Was any of this waste shipped off-site in 2009 for treatment, disposal or recycling? <input checked="" type="checkbox"/> Yes (CONTINUE TO ITEM B) <input type="checkbox"/> No (FORM IS COMPLETE)			
Site 1	B. EPA ID No. of facility to which waste was shipped OKD065438376	C. Off-site Management Method Code Shipped to H132	D. Total quantity shipped in 2009 7.000000	
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method Code Shipped to	D. Total quantity shipped in 2009	
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method Code Shipped to	D. Total quantity shipped in 2009	

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: Northrop Grumman Guidance and Electronics
Company, Inc.

EPA ID NO: MOD007152903

**U.S. ENVIRONMENTAL
PROTECTION AGENCY**

2009 Hazardous Waste Report

**WASTE GENERATION
AND MANAGEMENT**

**GM
FORM**

Sec. 1	A. Waste Description Toxic Solids From Remediation Carbon Filter System Containing Trace Solvents		
B. EPA Hazardous Waste Code(s) F002 F003 F005		C. State Hazardous Waste Code(s)	
D. Source Code G44 Management Method Code for Source Code G25	E. Form Code W310	F. Quantity Generated in 2009 6,000.000000 UOM 1 Density 1.20 <input type="checkbox"/> lbs/gal <input checked="" type="checkbox"/> sg	G. Waste Minimization Code X

Sec. 2	Was any of this waste managed on-site? <input type="checkbox"/> Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> No (SKIP TO SEC. 3)	
ON-SITE PROCESS SYSTEM 1 On-site Management Method Code Quantity treated, disposed or recycled on-site in 2009		ON-SITE PROCESS SYSTEM 2 On-site Management Method Code Quantity treated, disposed or recycled on-site in 2009

Sec. 3	A. Was any of this waste shipped off-site in 2009 for treatment, disposal or recycling? <input checked="" type="checkbox"/> Yes (CONTINUE TO ITEM B) <input type="checkbox"/> No (FORM IS COMPLETE)		
Site 1	B. EPA ID No. of facility to which waste was shipped ARD069748192	C. Off-site Management Method Code Shipped to H040	D. Total quantity shipped in 2009 6,000.000000
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method Code Shipped to	D. Total quantity shipped in 2009
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method Code Shipped to	D. Total quantity shipped in 2009

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME:

Northrop Grumman Guidance and Electronics
Company, Inc.

EPA ID NO: MOD007152903

GM
FORMU.S. ENVIRONMENTAL
PROTECTION AGENCY

2009 Hazardous Waste Report

WASTE GENERATION
AND MANAGEMENT

Sec. 1	A. Waste Description Toxic Solids From Remediation System Containing Trace Solvents		
B. EPA Hazardous Waste Code(s) F002 F003 F005		C. State Hazardous Waste Code(s)	
D. Source Code G44 Management Method Code for Source Code G25	E. Form Code W301	F. Quantity Generated in 2009 4,950.000000 UOM 1 Density 1.20 <input type="checkbox"/> lbs/gal <input checked="" type="checkbox"/> sg	G. Waste Minimization Code X

Sec. 2	Was any of this waste managed on-site? <input type="checkbox"/> Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> No (SKIP TO SEC. 3)	
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2
On-site Management Method Code	Quantity treated, disposed or recycled on-site in 2009	On-site Management Method Code Quantity treated, disposed or recycled on-site in 2009

Sec. 3	A. Was any of this waste shipped off-site in 2009 for treatment, disposal or recycling? <input checked="" type="checkbox"/> Yes (CONTINUE TO ITEM B) <input type="checkbox"/> No (FORM IS COMPLETE)		
Site 1	B. EPA ID No. of facility to which waste was shipped UTD991301748	C. Off-site Management Method Code Shipped to H132	D. Total quantity shipped in 2009 4,950.000000
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method Code Shipped to	D. Total quantity shipped in 2009
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method Code Shipped to	D. Total quantity shipped in 2009

Comments:

NORTHROP GRUMMAN

Northrop Grumman Corporation
Post Office Box 1693; Mail Stop 1401
Baltimore, Maryland 21203

February 4, 2010

Missouri Department of Natural Resources
Hazardous Waste Program, Biennial Report
PO Box 176
Jefferson City, MO 65102-0176

RE: 2009 Biennial Hazardous Waste Report
EPA ID # MOD007152903
Missouri ID# 001317

Dear Sir or Madam:

Please find enclosed the 2009 Biennial Hazardous Waste Report for the Northrop Grumman Guidance and Electronics Company, Inc. facility at 4811 West Kearney in Springfield, Missouri.

Please note that this Biennial Hazardous Waste Report is required due to episodic waste generation resulting from remediation operations at the site.

If you should have any questions or require additional information please feel free to call me on (410) 993-7080.

Sincerely,



Adam Saylor
Senior Environmental Engineer

Enclosure

Certified Mail #7008 3230 0003 1435 3909

RECEIVED
FEB 22 2010
Hazardous Waste Program
MO Dept. of Natural Resources